

Incident Report

Print Date/Time: 06/05/2016 17:44

Login ID: ss0139

Lake Stevens Police Department

ORI Number: WA0311900

Incident: 2016-00009593

Incident Date/Time: 5/20/2016 4:42:15 PM
Location: SR 204 / 91ST AVE NE

LAKE STEVENS WA 98258

Phone Number: (425) 343-3450

Report Required: No Prior Hazards: No LE Case Number:

Incident Type: Collision
Venue: Lake Stevens

 Source:
 911

 Priority:
 3

 Status:
 3

Nature of Call:

Unit/Personnel

UnitPersonnel19D2SS0127-Adams19S15SS0126-Hingtgen

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Reporting Party	WITN, BRENDA /		(425) 343-3450			
1	Driver	GASCA, EDWARD D	10725 VERNON RD LAKE STEVENS WA 98258	(425) 218-1234		Male	05/21/1963
2	Driver	PICKENS, PATTI JEAN	41322 NELSON PL	(425) 737-8320	White	Female	06/22/1983

Gold Bar WA 982510000

Vehicle(s)

Role Type Year Make Model Color License State

Disposition(s)

Disposition Count
M 1

Property

Date Code Type Make Model Description Tag No. Item No.

CAD Narrative

05/20/2016 : 17:19:58 SP0274 Narrative: CANCEL TOP NOTCH 05/20/2016 : 16:53:13 SP0274 Narrative: TOP NOTCH TOW ENRT

05/20/2016: 16:49:48 SP0338 Narrative: ALL GRN PT

05/20/2016: 16:48:20 SP0338 Narrative: 1 VEH BLKING W/PD

05/20/2016: 16:45:17 SP0386 Narrative: THIS RP IS EDWARD GASGA #/425-218-1234

05/20/2016: 16:45:00 SP0386 Narrative: NEW RP, IS DRIVER OF SILVERADO, STATES NON-INJ

05/20/2016: 16:44:23 SP0348 Narrative: BLKING SB LANE OF 91ST, BRO SILVERADO PU VS BLK CHEVY HHR

05/20/2016: 16:43:49 SP0348 Narrative: 3 VEHS

	STATE OF WASHINGTON POLICE TRAFFIC P	0 5 27							
lises 3	COLLISION REPORT 1591971 INTERSTATE CITY STREET FIRE RESULTED CASE # 2016-00009593								
1 1	STATE ROUTE OTHER OTHER LOCAL AGENCY CODING								
2 1	COUNTY RD PRIVATE WAY INVOLVED TOTAL # OF O OBJECT	1 8 28							
<u></u>	TRIBAL RESERVATION M M D D Y Y Y Y TIME (2400) COUNTY # MILES CITY #								
³	DATE OF COLLISION 05 - 20 - 2016 1643 31 N N E W OF OF 0664 3								
4	ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION BLOCK NO.								
4a	91ST AVE NE GOO MILE POST 600	0 4 29							
5	DISTANCE OF (REFERENCE OR CROSS STREET) 150 N FEET SR 204								
	UNIT 01 MOTOR VEHICLE PEDAL- CYCLE DAMAGE THRESHOLD MET VES V NO D: 4252181234	0 1 30							
6 2	LAST NAME GASCA FIRST NAME EDWARD MIDDLE INITIAL D								
	STREET 10725 VERNON RD								
7	CITY LAKE STEVENS ST WA ZIP 98258	1 2 31							
8	CDL RESTRICTIONS ENDORSEMENTS 2								
9 9	DRIVER'S LICENSE # GASCAED378K1 STATE WA SEX M D.O.B. MMDDYYYY 05 _ 21 _ 1963	1 2 32							
10 9	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET 2 INJURY CLASS 1	- 32							
11 2 5	LICENSE PLATE # C40354D STATE WA VIN# 3GCPKSE7XDG113935								
12 2 5	TRAILER PLATE # STATE TRAILER PLATE # STATE								
13 4	VEH. YEAR 2013 MAKE CHEV MODEL CK1500 STYLE CW VEHICLE TOWED YES NO TOWED BY GOVT. VEHICLE TOWED YES NO TOWED BY	3 5 33							
14 4	REGISTERED OWNER INFO. EDWARD GASCA 2718 86TH DR NE LAKE STEVENS WA 98258 VEHICLE NO. 1 SHADE IN DAMAGED ON DAMAGED AREA LIABILITY INSURANCE A POLICY # STORY A POLICY # PTOP	FROM TO 34							
15 2	LIABILITY INSURANCE INSURANCE COAST NATIONAL G00 7022683 00 NEFFECT VEHICLE YES NO CITATION # CHARGE TO BOTTOM # CHARGE								
16 2	UNIT 02 MOTOR VEHICLE PEDAL- PEDESTRIAN PROPERTY OWNER DAMAGE THRESHOLD MET PHONE D: 4257378320	4 35							
	LAST NAME PICKENS FIRST NAME PATTI MIDDLE INITIAL J	4 36							
17	STREET NEW ADDRESS 41322 NELSON PL	37							
18	CITY GOLD BAR ST WA ZIP 982510000	38							
19	CDL RESTRICTIONS ENDORSEMENTS	39							
20	DRIVER'S LICENSE# PICKEPJ173L2 STATE WA SEX F D.O.B. MMDDYYYY 06 - 22 - 1983	40							
21	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET 2 INJURY 1 NATURE OF INJURIES								
22	LICENSE PLATE # 238WZJ STATE WA VIN# 3GNDA13D18S553237								
23	TRAILER PLATE # STATE TRAILER PLATE # STATE	1 41							
24	VEH. YEAR 2008 MAKE CHEV MODEL HHR STYLE 4T VEHICLE TOWED TOWED BY REGISTERED OWNER INFO. LAWRENCE PICKENS 41322 NELSON PL GOLD BAR WA 98251 VEHICLE TOWED TOWED BY VEHICLE TOWED	1 42							
	SHADE N DAMAGED AREA SHADE N DAMAGED AREA 3 4								
25	N EFFECT VEHICLE YES NO CITATION # CHARGE CHARGE 8 7 6								
26	OFFICER'S NAME (PRINT) M. HINGTGEN BADGE OR ID # AGENCY WA0311900								
	PAGE 01 OF 3								





CORRECTION

CASE #

REPORT NO.

E546049

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19	972		

2016-00009593

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)											
NAME (LAST, FIRST, MIDDLE INITIAL)				·							
ADDRESS & PHONE #						SEX		O.B.		_	
PASSENGER WITNESS	UNIT #	SEA POS	AT S. AIRBAG	RESTR.	EJECT	HELN US	MET E	INJURY CLASS		NATURE OF INJU	JRIES
NAME (LAST, FIRST, MIDDLE INITIAL)											
ADDRESS & PHONE #						SEX	D.0 MMD	O.B.	-	-	
PASSENGER WITNESS	UNIT #	SEA POS		RESTR.	EJECT	HELM		INJURY CLASS		NATURE OF INJU	JRIES
NAME (LAST, FIRST, MIDDLE INITIAL)											
ADDRESS & PHONE #						SEX		O.B.		-	
PASSENGER WITNESS	UNIT#	SEA POS	AT AIRBAG	RESTR.	EJECT			INJURY CLASS		NATURE OF INJU	JRIES
				NARRATI	VE	•					
DACCENCED TO WITNESS TO LINIT # JOHN JUDGAS DESTROY FIRST TELIVICI INJUNIT											
M. HINGTGEN NVESTIGATING OFFICER'S	SIGNATURE		UNIT OR DIST. DET	05-21- DATED	16 06:38 AM		PLACE SI	GNED			
APPROVED BY R. BROOKS 0013						5/22	/2016 3:	:30:19 AM			
BADGE OR ID # 0126		ORI# N	/A0311900		TIME POLICE D	DISPATCHED	4:43 PM	1	TIME P	OLICE ARRIVED	4:45 PM

REPORT NO. E546049

CASE#

2016-00009593

DATE AND TIME 05/20/16 16:43

